

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03345

FILED
Jan 08, 2010
Secretary of State

Entity Name: CALICO COUNTRY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8360 SW 41ST COURT
DAVIE, FL 33328 US

New Principal Place of Business:

Current Mailing Address:

C/O COMMAND MANAGEMENT LLC
1835 NE MIAMI GARDENS DR., #204
NORTH MIAMI BEACH, FL 33179 US

New Mailing Address:

FEI Number: 59-2682110 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COMMAND MANAGEMENT LLC
1835 N.E. MIAMI GARDENS DR.
SUITE 204
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: T
Name: GEORGIANNA, MELISSA
Address: 8360 SW 41 CT.
City-St-Zip: DAVIE, FL 33328

Title: S
Name: LOPEZ, LOU ANN
Address: 8361 SW 41 CT
City-St-Zip: DAVIE, FL 33328

Title: VP
Name: GROSSWALD, GARY
Address: 8251 SW 41 CT
City-St-Zip: DAVIE, FL 33328

Title: P
Name: BARRY, WILLIAM
Address: 4131 SW 84TH TER
City-St-Zip: DAVIE, FL 33328

Title: D
Name: EVANS, FRANKLIN T
Address: 4141 SW 84 TERR
City-St-Zip: DAVIE, FL 33328

Title: D
Name: QUIJADA, JOSE
Address: 8371 SW 41 CT
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELISSA GEORGIANNA

TREA

01/08/2010

Electronic Signature of Signing Officer or Director

Date